

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

094019984

CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
FOR			NUMBER FILED			NUMBER EXTRA		Γ	RATE	FEE		RATE	FEE
BASIC FEE								Ī		345.00	OR		690.00
TOTAL CLAIMS				minus 2	20=	*			X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS	minus 3 =			*		Ī	X39=		OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT									+130=		OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2									TOTAL		OR	TOTAL	490
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									SMALL ENTITY			OTHER THAN SMALL ENTITY	
AMENDMENT A	A	CL REM AI AMEN			PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* 1	4	Minus	**	50	= 0	ı	X\$ 9=	-	OR	X\$18=	
	Independent FIRST PRESE	*)	Minus	***		<u> </u>		X39=		OR	X78=	
	FIRST PRESE	NIAIR	JN OF W	OLTIPLE DEF	CINL	DENT CLAIM		Ī	+130=		OR	+260≈	
									TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
_		(Col	umn 1)_	·	(0	Column 2)	(Column 3)				,	10011.1 22	
AMENDMENT B	B	REM A	AIMS IAINING FTER NDMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* /	4	Minus	**	20	= ()		X\$ 9=		OR	X\$18=	
	Independent FIRST PRESE	*) ON OF M	Minus	***	<u> </u>	= 0		X39=		OR	X78=	
	FINOT FRESE	NIAIN	DIN OF IVI	OLITEL DEF	LINE	DENT CLAIM		Ī	+130=		OR	+260=	
									TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
,	,	(Col	umn 1)		(0	Column 2)	(Column 3)						
AMENDMENT C		REM A	LAIMS MAINING FTER NDMENT		Pí	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*		Minus	**	•	=	┟	X39=			X78=	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR		
	* If the entry in column 1 is less than the entry in column 2 write "0" in column 2										OR	+260=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
·"	If the "Highest Nu The "Highest Nun									oropriate box	c in col	lumn 1.	1